

COMBINED DECLAR	ATION FO	R UTILITY OR	DESIGN PATENT	ATTORNEY'S DOCKET PU3126USW
APPLICATION WITH	First Names Inventor:			
				GLOVER (formerly
				Carter)
	Complete if known:			
() Declaration submitted with initial	App No.:			
() Declaration submitted after initial	09/647,962			
	Filing Date October 6, 2000			
•				Group Art Unit:
				1623
As below named	inventor. I hereb	y declare that:		
My residence, post office	address and citize	enship are as stated belo	w next to my name.	
(if plural names are listed	, first and sole inv below) of the sub	ventor (if only one name ject matter which is clai	is listed below) or an original, fi med and for which a patent is so	rst and joint inventor ught on the invention
entitled: NOVEL CR	YSTALLINE FO	ORMS OF AN ANTIV	IRAL BENZIMIDAZOLE CO	MPOUND
the specification of which	(check only one i	tem below):		
[]is attached hereto.				
T.I OR				
	as United S	tates application Serial	No or PCT Into	ernational
j=6.	//CD00/02214 El-	.d Amril 1 1000 and was	s amended on (MM/DD/YYYY)	
Application Number PC1	<u>/EP99/02214</u> me applicable)	d <u>April 1, 1999</u> and was	s amended on (MM/DD/YYYY)	
: 1년: **********************************				
I hereby state that I have a as amended by any amended	eviewed and unde Iment specifically	erstand the contents of the referred to above.	he above-identified specification	, including the claims,
I acknowledge the duty to	disclose informa	tion which is material to	patentability as defined in 37 Cl	FR §1.56.
I hereby claim foreign pri	ority benefits und	er 35 IISC 8119 (a)-((d) or §365(b) of any foreign app	lications(s) for patent
or inventor's certificate or	365(a) of any PC	T international applicat	ion which designated at least one	country other than the
United States of America	listed below and	have also identified bel-	ow, by checking the box, any for	eign application for
		T international applicati	ion having a filing date before the	at of the application on
which priority is claimed:				
PRIOR FOREIGN AND ANY P	RIORITY CLAI	MS UNDER 35 U.S.C	. 119:	
Prior Foreign Application Number (s)		country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED
1.GB	98	07354.7	April 7, 1998	x
2.				
3.				
4.				
5. I hereby claim the benefit under T	itle 35 United Str	ates Code 8119(e) of any	v United States provisional applie	cation(s) listed below:
Application No.	ine 33, Onned Sta		(MM/DD/YYYY)	Tanada Cara
Application No.		1 ming Date		
2.				



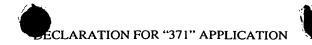
COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

PU3126USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR	U.S. PARENT A	APPLICATION of PCT PAREN	II APPLICATI	UN			
					STATUS (Check one)		
U.S. I			ling Date D/YYYY)	PATENTED	PENDING	ABANDONED	
POWER in the U.S	OF ATTORNEY: A . Patent and Trademan	s a named inventor, I hereby appoint the rk Office connected therewith. (List name	following attorney(s) and registration nur	and/or agent(s) to prose nber)	cute this application an	d transact all business	
Cha Kan Rob	id J. Levy Fles E. Dadswell En L. Prus ert H. Brink abeth Selby	Reg. No. 35,851 Vii Reg. No. 39,337 Fra Reg. No. 36,094 Ch	nes P. Riek rginia C. Bennett Ink P.Grassler ristopher P. Rogers rie Ann Morgan	Reg. No. 39,009 Reg. No. 37,092 Reg. No. 31,164 Reg. No. 36,334 Reg. No. 38,181	Bonnie L. Deppenbro John L. Lemanowicz Amy H. Fix		
	GlaxoSmithKline Five Moore Drive,	tual Property Department	23347 nt trademark offic	E		lls to: .nn Morgan 483-8222	
\$ 5 5 5 5	and belief are be statements and th	that all statements made herein of clieved to be true; and further that the like so made are punishable by may jeopardize the validity of the	these statements fine or imprison	were made with the ment, or both, under	knowledge that wir 18 U.S.C. 1001, a	illful false and that such willful	
jeini.	FULL NAME	FAMILY NAME	FIRST GIVEN NAM	иE	SECOND GIVEN NAME	/INITIAL	
2 🌬		GLOVER	Bobby		Neal		
	INVENTOR'S	Lobby Neal.	\$//n-		DATE: /o/	8/0/	
0	SIGNATURE RESIDENCE & CITIZENSHIP	Durham	STATE OR FOREIGNC	GN COUNTRY	COUNTRY OF CITIZEN		
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	Research Ti	riangle Park	NC 27709 US	DUNTRY	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAM	ME	SECOND GIVEN NAME	VINITIAL .	
2	OF INVENTOR	HUANG	Lian-Feng		 		
	INVENTOR'S				DATE:		
_	SIGNATURE	CITY	STATE OR FOREI	GN COUNTRY	COUNTRY OF CITIZEN	SHIP	
0	RESIDENCE & CITIZENSHIP	Durham	NC		US		
[POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/CO	DUNTRY	
2	ADDRESS	GlaxoSmithKline, Inc.	Research Ti	riangle Park	NC 27709 US		
l 1	1	Five Moore Drive PO Rox	I		1	•	



COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

PU3126USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

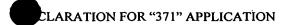
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						STATUS (Check	one)
U.S. Parent App	plication or Number	PCT Parent	Parent Fili (MM/DD/		PATENTED	PENDING	ABANDONED
				-······			
OWER OF ATTO the U.S. Patent ar	ORNEY: A	As a named inventoral of the connected o	r, I hereby appoint the fo I therewith. (List name a	llowing attorney(s) and registration nu	and/or agent(s) to prose mber)	ecute this application an	d transact all business
David J. Levy		Reg. No. 27,655	Jame	es P. Riek	Reg. No. 39,009	Bonnie L. Deppenbro	
Chairles E. Dao		Reg. No. 35,851		inia C. Bennett	Reg. No. 37,092	John L. Lemanowicz	
Karen L. Prus		Reg. No. 39,337		k P.Grassler	Reg. No. 31,164	Amy H. Fix	Reg. No. 42,616
Robert H. Brir		Reg. No. 36,094		stopher P. Rogers	Reg. No. 36,334		
Ehzabeth Selb	у	Reg. No. 38,298	Lorie	e Ann Morgan	Reg. No. 38,181		
Send Correspon	dence to:		1 (((((((((((((((((((Direct Telephone Ca	ils to:
David J.	Levy. Pat	ent Counsel					
Corpora	te Intellec	tual Property Dep	artment	ETA MENAT DANA INDEMININTALISMA			ınn Morgan
T Claves	nith Wiina			23347		919-4	483-8222
Five Mo	ore Drive,	PO Box 13398		TRADEMARK OFFICE	•	1	
■ Research	h Triangle	Park, NC 27709	TATENT	TRADEMARK OFFICE	<u> </u>		
⊫ I hereb	v declare	that all stateme	nts made herein of I	ny own knowle	edge are true and tha	at all statements ma	de on information
			e; and further that the				
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FULL		may jeopardize	the validity of the a	ine or imprison application or a	ment, or both, unde ny patent issuing the	er 18 U.S.C. 1001, a ereon.	and that such willf
	NAME	may jeopardize	the validity of the a	ine or imprison application or a	ny patent issuing the	er 18 U.S.C. 1001, a ereon.	and that such willf
	NAME /ENTOR	may jeopardize	the validity of the a	application or a	ny patent issuing the	ereon.	and that such willf
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INVEN	VENTOR'S	may jeopardize	the validity of the a	application or a	ny patent issuing the	EFEOTI. SECOND GIVEN NAME	and that such willf
INVEN SIGNA	ENTOR	may jeopardize	the validity of the a	application or a	ny patent issuing the	SECOND GIVEN NAME Neal DATE: COUNTRY OF CITIZEN	and that such willf
INVEN SIGNA 0 RESIDI	VENTOR NTOR'S ATURE	may jeopardize	the validity of the a	FIRST GIVEN NAM Bobby	ny patent issuing the	SECOND GIVEN NAME Neal DATE: COUNTRY OF CITIZEN US	and that such willf
INVEN SIGNA 0 RESIDI CITIZI	VENTOR NTOR'S ATURE ENCE & ENSHIP	FAMILY NAME GLOVER	the validity of the a	PRINT GIVEN NAME BODDY STATE OR FOREI NC CITY	ny patent issuing the	SECOND GIVEN NAME Neal DATE: COUNTRY OF CITIZEN US STATE & ZIP CODE/CO	and that such willf
INVEN SIGNA 0 RESIDI CITIZI POST	VENTOR NTOR'S ATURE ENCE &	FAMILY NAME GLOVER CITY Durham	the validity of the a	PRINT GIVEN NAME BODDY STATE OR FOREI NC CITY	ny patent issuing the	SECOND GIVEN NAME Neal DATE: COUNTRY OF CITIZEN US	and that such willf
INVEN SIGNA 0 RESIDI CITIZI POST	VENTOR VTOR'S ATURE ENCE & ENSHIP OFFICE	FAMILY NAME GLOVER CITY Durham POST OFFICE ADDR GlaxoSmith	the validity of the a	PRINT GIVEN NAME BODDY STATE OR FOREI NC CITY	ny patent issuing the	SECOND GIVEN NAME Neal DATE: COUNTRY OF CITIZEN US STATE & ZIP CODE/CO	and that such willf
INVEN SIGNA 0 RESIDI CITIZI POST	VENTOR VTOR'S ATURE ENCE & ENSHIP OFFICE	FAMILY NAME GLOVER CITY Durham POST OFFICE ADD GlaxoSmith Five Moore I	the validity of the a	PRINT GIVEN NAME BODDY STATE OR FOREI NC CITY	ny patent issuing the	SECOND GIVEN NAME Neal DATE: COUNTRY OF CITIZEN US STATE & ZIP CODE/CO	and that such willf
0 RESIDIO CITIZZE POST (1 ADD)	VENTOR VTOR'S ATURE ENCE & ENSHIP OFFICE DRESS	FAMILY NAME GLOVER CITY Durham POST OFFICE ADDR GlaxoSmithly Five Moore I 13398 FAMILY NAME	the validity of the a	FIRST GIVEN NAM Bobby STATE OR FOREI NC CITY Research TI	ny patent issuing the	SECOND GIVEN NAME Neal DATE: COUNTRY OF CITIZEN US STATE & ZIP CODE/CO	and that such willf
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			FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	FULL NAME	FAMILY NAME		William
2	OF INVENTOR	LANCASTER	Robert	
1	INVENTOR'S	le lever	cea	DATE: 24th September 200
l	SIGNATURE		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	CITY	GB	GB
	CITIZENSHIP	Stevenage POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	POST OFFICE	GlaxoSmithKline	Research Triangle Park	NC 27709 US
3	ADDRESS	= =	Research Triangle Lark	110 27705 00
Ī		Five Moore Drive, PO Box		
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LONG	Stacey	Todd
	INVENTOR'S			DATE:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC US	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	•	•
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2.	OF INVENTOR	RIZZOLIO	Michele	Catherine
	INVENTOR'S		*	DATE:
1-7	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	CH (Switzerland)
1.00 mg	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
.5:	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
5		Five Moore Drive, PO Box	1	
1-4		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
-2	OF INVENTOR	SCHMITT	Eric	Allen
12 =6	INVENTOR'S	1		DATE:
	SIGNATURE			
Ď	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ľ	CITIZENSHIP	Libertyville	IL	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
161	ADDRESS	301 Evergreen Court	Libertyville	IL 60048 US
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	SICKLES	Barry	Riddle
I ~	INVENTOR'S			DATE:
1	SIGNATURE	1		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
_	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	СПҮ	STATE & ZIP CODE/COUNTRY
7	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
1		Five Moore Drive, PO Box		·
		13398		
L	1	1_20070		

ECLARATION FOR "371" APPLICATION

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LANCASTER	Robert	William
	INVENTOR'S			DATE:
1	SIGNATURE			
0 -	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1 0	CITIZENSHIP	Stevenage	GB	GB
1		POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
! _	POST OFFICE	GlaxoSmithKline	Research Triangle Park	NC 27709 US
1 3	ADDRESS		Acescul en 11 augus 1 au 1	1.02,703
i		Five Moore Drive, PO Box		1
!		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LONG	Stacey	Todd
I I	INVENTOR'S	1 ~ 11	7	DATE: 0 + 1 2001
	SIGNATURE	200dd		DATE: Oct. 1,2001
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	Durham	NC US	US
İ	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
•		Five Moore Drive, PO Box		İ
	1	13398		
		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	FULL NAME	RIZZOLIO	Michele	Catherine
2	OF INVENTOR	RIZZOLIO	Michele	
	INVENTOR'S		*	DATE:
	SIGNATURE	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	Durham	NC	CH (Switzerland)
1 4	CITIZENSHIP POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
_	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
5 1	ADDRESS	Five Moore Drive, PO Box		1
	1	13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	F OF INVENTOR	SCHMITT	Eric	Allen
	INVENTOR'S			DATE:
1	SIGNATURE			
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP US
1 12	CITIZENSHIP	Libertyville	IL	
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
6	<u> </u>	301 Evergreen Court	Libertyville	IL 60048 US
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	SICKLES	Barry	Riddle
1 "	INVENTOR'S			DATE:
1	SIGNATURE		Loreston on consider continuer	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	US
1	CITIZENSHIP	Durham	NC	STATE & ZIP CODE/COUNTRY
1	POST OFFICE	POST OFFICE ADDRESS	1	
7	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box		
		13398		
	<u> </u>	<u> </u>		

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
l 2	OF INVENTOR	LANCASTER	R bert	William
1 -	INVENTOR'S	2.1.0.12.2		DATE:
	SIGNATURE			<u> </u>
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ľ	CITIZENSHIP	Stevenage	GB	GB
1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
]	ADDRESS	1	Research Triangle Lark	1102/109 00
j		Five Moore Drive, PO Box		
		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LONG	Stacey	Todd
1	INVENTOR'S			DATE:
İ	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	Durham	NC US	US
i	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	1	
		13398		
<u> </u>		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	FULL NAME	RIZZOLIO	Michele	Catherine
2	OF INVENTOR		Michele	
	INVENTOR'S	M		DATE: SEPI 25, 2001
	SIGNATURE	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0 [RESIDENCE &	Durham	NC	CH (Switzerland)
	CITIZENSHIP POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
3 .	H ADDRESS		Research Triangle Laik	Ne 27/05 65
1 !!	!	Five Moore Drive, PO Box		
,12		13398		·
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	SCHMITT	Eric	Allen
]	INVENTOR'S			DATE:
	1 SIGNATURE	İ		
0 🖫	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	Libertyville	IL	US
i. Š	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
6	ADDRESS	301 Evergreen Court	Libertyville	IL 60048 US
12	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	SICKLES	Barry	Riddle
1	INVENTOR'S			DATE:
1	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	Durham	NC	US
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7	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	1	
l		13398		
L	<u> </u>	12070	L	





•	ATION FOR UTILITY OF ATTORNE		ATTORNEY'S DOCKET PU3126USW First Names Inventor: GLOVER (formerly Carter)
() Declaration submitted with initial	Complete if known: App No.:		
() Declaration submitted after initial	09/647,962		
			Filing Date October 6, 2000
			Group Art Unit:
			1623
As below named	inventor. I hereby declare that:		
My residence, post office a	address and citizenship are as stated b	elow next to my name.	
(if plural names are listed lentitled:	first and sole inventor (if only one national) of the subject matter which is	claimed and for which a patent is so	ught on the invention
O NOVEL CRY	YSTALLINE FORMS OF AN ANI	TVIRAL BENZIMIDAZOLE CO	MPOUND
the specification of which	(check only one item below):		
Application Number PCT	as United States application Ser EP99/02214_filed April 1, 1999 and		
I hereby state that I have r as amended by any amend	eviewed and understand the contents ment specifically referred to above. disclose information which is material.		
I hereby claim foreign price or inventor's certificate or United States of America.	ority benefits under 35, U.S.C. §119 (365(a) of any PCT international applisted below and have also identified cate or of any PCT international appl	a)-(d) or §365(b) of any foreign application which designated at least one below, by checking the box, any for	vications(s) for patent e country other than the reign application for
	RIORITY CLAIMS UNDER 35 U.		PRIORITY
Prior Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED
1.GB	9807354.7	April 7, 1998	Х
2.			
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5.	tle 35, United States Code §119(e) of	Fany United States provisional appli	cation(s) listed below:
Application No.		Date (MM/DD/YYYY)	cattories) fisted octow.
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COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER PU3126USW

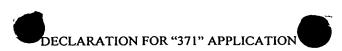
I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

RIOR	U.S. PARENT A	PPLICATION or PCT PAREN	NT APPLICATI	ON		
				STATUS (Check		
U.S. I	U.S. Parent Application or PCT Parent Number		iling Date D/YYYY)	PATENTED	PENDING	ABANDONED
· · · · · · · · · · · · · · · · · · ·						
OWER	OF ATTORNEY: A	s a named inventor, I hereby appoint the	following attorney(s)	and/or agent(s) to pros	ecute this application ar	d transact all business
the U.S	S. Patent and Tradema	rk Office connected therewith. (List nam	e and registration nu	mber)		
					Donnie I Dennenhr	ock Reg. No. 28,209
	rid J. Levy	106.110.211000	mes P. Riek	Reg. No. 39,009 Reg. No. 37,092	John L. Lemanowicz	Reg. No. 37 380
	rtes E. Dadswell		rginia C. Bennett	Reg. No. 31,164	Amy H. Fix	Reg. No. 42,616
	En L. Prus	1.0g. 1.0. 0 / j. 0	ank P.Grassler ristopher P. Rogers	Reg. No. 36,334	Ally II. Lix	1108.110. 12,010
	ert H. Brink		rie Ann Morgan	Reg. No. 38,181		
Eliz	abeth Selby	Reg. No. 38,298 Lo	HE AIH MURAI	146. 110. 20,101		
					Direct Telephone Ca	alls to:
Send Co	orrespondence to:		H 1881 KAR KITTO KIMBO KKIM BEBUI 18	NIII .		
hin	David J. Levy, Pate	ent Counsel			Lorie A	Ann Morgan
4,	Corporate Intellec	tual Property Department		11 (11)	919-	483-8222
f	GlaxoSmithKline Five Moore Drive,	DO Dow 12200	23347		1	
	Research Triangle		PATENT TRADEMARK O			
:2:		Park. NC. 27709	A IENI IKADEMAKA U	FFICE		
- 3	: I beselve dealers				l nat all statements ma	ade on information
1.	-i.I hereby declare	that all statements made herein o	f my own knowl	edge are true and th	nat all statements many less that we	ade on information
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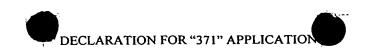
Five Moore Drive, PO Box

CLARATION FOR "371" APPLICATION

		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	FULL NAME	LANCASTER	Robert	William
2	OF INVENTOR	LANCASTER	Robert	
	INVENTOR'S			DATE:
	SIGNATURE		The second second	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	GB
	CITIZENSHIP	Stevenage	GB	STATE & ZIP CODE/COUNTRY
	POST OFFICE	POST OFFICE ADDRESS	CITY Davids Davids	NC 27709 US
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27/09 US
	'	Five Moore Drive, PO Box		
		13398	1	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LONG	Stacev	Todd
-	INVENTOR'S			DATE:
	SIGNATURE			1
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
U	CITIZENSHIP	Durham	NC US	US
;	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
4	ADDRESS		10000m on Arming of a man	
1		Five Moore Drive, PO Box		·
i		13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	RIZZOLIO	Michele	Catherine
	INVENTOR'S			DATE:
	SIGNATURE			
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
]	CITIZENSHIP	Durham	NC	CH (Switzerland)
1	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
5	- ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
;	4.j	Five Moore Drive, PO Box		
l :	A i	13398	1	i
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
1 .		SCHMITT	Eric	Allen
2	OF INVENTOR	John The Committee of t		DATE:
	INVENTOR'S	gir blen		DAIL.
	SIGNATURE	CIFY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	Libertyville	IL	US
	CITIZENSHIP	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	POST OFFICE	301 Evergreen Court	Libertyville	IL 60048 US
6	ADDRESS	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	FULL NAME	1	Barry	Riddle
2	OF INVENTOR	SICKLES	Daily	DATE:
	INVENTOR'S			DATE
1 . "	SIGNATURE		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	CITY	NC	US
1	CITIZENSHIP	Durham POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	POST OFFICE		Research Triangle Park	NC 27709 US
7	ADDRESS	GlaxoSmithKline	Research Triangle Fark	110 2/107 03
1	1	Five Moore Drive, PO Box		
1	l .	13398		
		<u> </u>		



		TION FOR UTILITY OR POWER OF ATTORNEY	DESIGN PATENT	ATTORNEY'S DOCKET PU3126USW First Names Inventor: GLOVER (formerly Carter)			
	() Declaration submitted with initial filing or () Declaration submitted after initial filing (surcharge required 37CFR1.16(e))						
	As below named i	nventor. I hereby declare that:		1623			
	My residence, post office a	ddress and citizenship are as stated belo	w next to my name.				
	I believe I am the original, (if plural names are listed be	first and sole inventor (if only one name elow) of the subject matter which is clair	is listed below) or an original, fi med and for which a patent is so	ught on the invention			
		check only one item below):	• •				
	Application Number PCT/	as United States application Serial EP99/02214 filed April 1, 1999 and wa pplicable)		1			
	I hereby state that I have reas amended by any amend	eviewed and understand the contents of t ment specifically referred to above.					
	I acknowledge the duty to	disclose information which is material to	patentability as defined in 37 C	FR §1.56.			
	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56. I hereby claim foreign priority benefits under 35, U.S.C. §119 (a)-(d) or §365(b) of any foreign applications(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:						
PRIO	R FOREIGN AND ANY P	RIORITY CLAIMS UNDER 35 U.S.C	. 119:				
Pric	or Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED			
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2.							
3. 4.							
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I hereb	y claim the benefit under Ti	tle 35, United States Code §119(e) of an	y United States provisional appli	cation(s) listed below:			
	Application No.		e (MM/DD/YYYY)				
1.	<u> </u>						
2.							



COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER
PU3126USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

2011		PPLICATION or			STATUS (Check one)		c one)
			Parent Filing	- Data	PATENTED	PENDING	ABANDONED
U.S. P	Parent Application or P	CI Parent	(MM/DD/Y		17(15)(15)		
	Number		(MINDO/ I	111)			
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WED	OF ATTORNEY: A	s a named inventor, I her	ehy appoint the follo	owing attorney(s)	and/or agent(s) to pro	secute this application	and transact all business
WER.	Detent and Trademar	k Office connected there	with (List name an	nd registration nu	mber)		
ine U.S	. Fatciit and Tradellar	k Office connected there	(2.01)				
Davi	id J. Levy	Reg. No. 27,655	James	P. Riek	Reg. No. 39,009	Bonnie L. Deppenb	rock Reg. No. 28,209
: Chai	rles E. Dadswell	Reg. No. 35,851	Virgin	nia C. Bennett	Reg. No. 37,092		z Reg. No. 37,380
Kare	en L. Prus	Reg. No. 39,337		P.Grassler	Reg. No. 31,164	Amy H. Fix	Reg. No. 42,616
	ert H. Brink	Reg. No. 36,094		opher P. Rogers	Reg. No. 36,334		
		Reg. No. 38,298	Lorie .	Ann Morgan	Reg. No. 38,181		
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1	orrespondence to:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	#181L18811881		Direct Telephone	Calls to:
44	David J. Levy, Pate	nt Counsel	ent IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	111111111111111			A . Mannan
IJ	Composete Intellect	ual Property Departme	.nt	1(1)) (11) (11)			Ann Morgan
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	GlaxoSmithKline	PO Box 13398					
T.	Five Moore Drive,	David N/C 27700	PATENT TRADEMA	ARK OFFICE			
N.	Five Moore Drive, Research Triangle	Park, NC 27709	patent tradem	ark office	edge are true and	that all statements r	nade on information
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7. 	Five Moore Drive, Research Triangle I hereby declare	Park, NC 27709 that all statements r	nade herein of n	ark office ny own knowl	s were made will i	me knowieuge uiai	William raise
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	FULL NAME	FAMILY NAME	1	
2	OF INVENTOR	LANCASTER	FIRST GIVEN NAME Robert	SECOND GIVEN NAME/INITIAL
	INVENTOR'S		Troucit	William
	SIGNATURE			DATE:
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	research Triangle Faik	NC 27709 US
		13398	1	
	FULL NAME	FAMILY NAME		
2	OF INVENTOR	LONG	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	INVENTOR'S	LONG	Stacey	Todd
	SIGNATURE			DATE:
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	
	CITIZENSHIP	Durham	NC US	COUNTRY OF CITIZENSHIP US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	i rescuren rilangie i alk	110 27/09 05
		13398		
	FULL NAME	FAMILY NAME		
2	OF INVENTOR	RIZZOLIO	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
_	INVENTOR'S	RILLOLIO	Michele	Catherine
	SIGNATURE			DATE:
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	
	CITIZENSHIP	Durham	NC	COUNTRY OF CITIZENSHIP
	POST OFFICE	POST OFFICE ADDRESS	CITY	CH (Switzerland) STATE & ZIP CODE/COUNTRY
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box	Triangle I alk	NC 2/109 US
		13398		
	FULL NAME	FAMILY NAME		
. 2	OF INVENTOR	SCHMITT	FIRST GIVEN NAME Eric	SECOND GIVEN NAME/INITIAL
:	INVENTOR'S	~ V-AVIAL A	LIC	Allen
	SIGNATURE			DATE:
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Libertyville	IL	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
6	ADDRESS	301 Evergreen Court	Libertyville	IL 60048 US
9	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	G INVENTOR	SICKLES	Barry	Riddle
	INVENTOR'S	By Ruddle &	/	DATE
	SIGNATURE			DATE: 27 Sept 2001
0	RESIDENCE &	CHY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durtiam	NC	US
7	POST OFFICE ADDRESS	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
′	WDDKE22	GlaxoSmithKline	Research Triangle Park	NC 27709 US
		Five Moore Drive, PO Box		, <i>,</i>
		13398		i /
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